

Department of Public Health & Human Services, Helena

Meeting Minutes February 15, 2012

I. Call to order

Brad Pickhardt, MD, FACS called to order the regular meeting of the State Trauma Care Committee at 1130 on February 15, 2012 in Helena, MT.

II. Roll call

Roll call was conducted and the following persons were present:

Present: Lauri Jackson, Freddy Bartoletti, Leah Emerson, Elaine Schuchard, Becky

Arbuckle, Don Whalen,

Brad Pickhardt, Dennis Maier, Roberta Shupe and Brad Vonbergen attended by

teleconference

Absent: Krissy Lowery, Sid Williamson

Guests: Harry Sibold, Joe Hansen, Gail Hatch, Jennie Nemec, Carol Kussman, John

Bleicher and Jim DeTienne.

Traci Jasnicki, Chuck Bratsky, Sally Hageman, Lynnae Lawrence and Drew Goss

attended by teleconference.

Handouts

• Agenda & previous meeting minutes

- CRTAC, ERTAC & WRTAC meeting minutes available for review
- Articles & Guidelines; Morbidity & Mortality Weekly Review: January 13, 2012;
 Guidelines for Field Triage of Injured Patients; Recommendations of the National Expert Panel on Field Triage, 2011

III. RTAC Reports

a) Central RTAC report given by Lauri Jackson

The last CRTAC meeting was January 26, 2012 and hosted by Benefis Healthcare with good attendance. CRTAC meeting minutes were available for review.

State report was given by Jennie Nemec & Carol Kussman. CRTAC focusing on hypothermia/normothermia in shock patients

Case review: Early transfer of trauma patients, ATLS Guidelines/issues, CT? When? Unstable patients to CT, Flight team arrival: "who's in charge?", communications issues

The next CRTAC meeting is scheduled for April 26, 2012 at Benefis Health Care.

b) Eastern RTAC report given by Sally Hageman

The last ERTAC meeting was December 8, 2011 at Billings Clinic. ERTAC meeting minutes were available for review.

Jennie Nemec & Carol Kussman provided the state Trauma System update.

Case reviews included; Resuscitation of hemorrhagic shock patients, anticoagulation and trauma and availability regionally/locallyof Fresh Frozen Plasma.

ERTAC is actively working on re-establishing their PI Subcommittee, PI Committee charter is being reviewed and being revised to include regional PI

The next ERTAC meeting is scheduled for March 8, 2012 and hosted by Billings Clinic.

c) Western RTAC report given by John Bleicher

The WRTAC meeting was held January 13 hosted by St Patrick Hospital in Missoula. WRTAC meeting minutes were available for review.

Nursing Education group: Designation/verification review tips, review & discussion of Trauma flowsheets and review/discussion of ND Trauma treatment manual for adoption in MT received enthusiastic support

EMS/Medical directors: the Bus Crash was reviewed along with a spirited discussion of backboard usage.

Jennie & Carol gave the state report. There is need for a new Chair & Secretary for WRTAC Case reviews included; decisions made dependent on remote/readily accessible situations and decisions made w/smaller/larger facility differences, chest stabbings, under-resuscitation issues including intubation and when to obtain ABGs, multiple patients and potential/actual issues encountered when trauma patients are not seen by trauma programs, discussion of when it is appropriate to obtain CTs prior to transfer.

Spring Fever is April 14 in Missoula. Harborview pediatric neurosurgeon speaking at Spring Fever will attend the next WRTAC meeting the day before (5/13/12)/

The next WRTAC meeting is scheduled for January 13, 2012 hosted by St Patrick Hospital in Missoula.

V.

VI. State Report; Jennie Nemec & Carol Kussman

"Thanks for your service" to STCC members leaving:

- Andy Michel, MT ACEP
- Justin Grohs, Private Ambulance Operators
- Pauline Linnell, MEMSA
- Jonathan Weisul, MHA

Our thanks to those re-appointed;

• Dennis Maier, MT COT

- Krissy Lowery, MT Trauma Coordinators
- Sam Miller, ERTAC
- Leah Emerson, WRTAC
- Elaine Schuchard, MT ENA
- Tim Sinton, CRTAC

WELCOME new members;

- Don Whalen, Private Ambulance Operators
- Becky Arbuckle, MEMSA
- Sid Williamson, MT ACEP
- Roberta Shupe, IHS

WELCOME new EMS System Manager;

Shari Graham, NREMT-P, sgraham2@mt.gov, 444-6098

Designation/Verification reviews scheduled; Re-designations;

Harlowton TRF
Deer Lodge TRF
Anaconda TRF

NEW Applications; Columbus TRF

Hardin TRF

Re-Designations Due; Conrad TRF

ACS Level III/MT Area Trauma Hospital, Kalispell Regional Medical Center, February 27 & 28, 2012 DESIGNATED MT Trauma Facilities: 39!

Education/Meetings;

Trauma System WebEx: February 14, 2012, 42 attendees

Topics; Performance Improvement, Peer Review, North Dakota Trauma Treatment Guidelines Manual

ATLS Courses for the rest of 2012

Additional issue: CT obtained prior to transfer?, increasing dwell times

• March 2-3 Great Falls- 2 MD, 1 midlevel slots

March 30-31 BillingsMay 18-19 Missoula

• November 2-3 Billings

website: www.dphhs.mt.gov/ems, Gail Hatch coordinates registration; ghatch@mt.gov, 444-3746

2012 Rocky Mountain Rural Trauma Symposium

ERTAC hosting

September 13 & 14, 2012

Grantree Inn, Bozeman

25th RMRTS!!!

+ MT Trauma System Conference September 12, 2012

Web-based Collector for current paper facilities

- Funding/contract
- Regional "Master Users" as resources
- obtain format, initiate installation
- Web-based instruction

Injury Prevention; Bobbi Perkins

TBI/Concussion Prevention

Governor's TBI Council; coordinating group stakeholders

Potential draft Sports concussion legislation

30 states currently have such legislation for;

- Recognition of S & S of concussion/TBI during sports
- Athlete pulled from play
- Return to play guidelines/clearance
- Prevention of second impact syndrome
- Contact Bobbi Perkins: <u>bperkins@mt.gov</u> or 444-4126

<u>Hospital Preparedness</u>

nd

- 2 half payments are being made to hospitals this week.
- Basic Disaster life Support (BDLS), 2/21, 2/23, 2/28, 3/1 class is full
- BDLS will be scheduled for mid April waiting for confirmation contractor
- ADLS June 1&2, 2012, Fairmont
- HPP Eastern Regional Conference April 17, Miles City
- HPP Western Regional Conference April 24, Polson
- FY12 HPP Guidance to be released early March/ new funding application due May 2. Will be a joint application with Public Health Emergency Preparedness

MT Trauma System Issues;

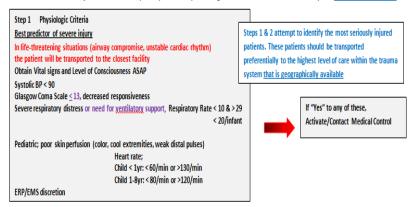
- Pediatric Neurosurgery availability
- Bariatric Trauma patients: new Pilatus PC-12 bariatric (650lb) FW aircraft, Stat-Air, Glasgow, Valley Med Flight, Williston & Grand Forks, ND
- Air Medical activation guidelines; Guidelines cards coming
- Interfacility Transfer Issues; cases being reviewed identifying ongoing IFT issues
- Anticoagulated trauma patients; ERTAC handout widely distributed to all RTACs and other statewide entities
- Hypothermia /Normothermia philosophy; DOCUMENT TEMPS, all phases of care
- IV Fluid resuscitation; DOCUMENT AMOUNT/TYPE of IV FLUIDS, all phases of care

Montana Field Trauma Decision Scheme/Trauma Team Activation Criteria

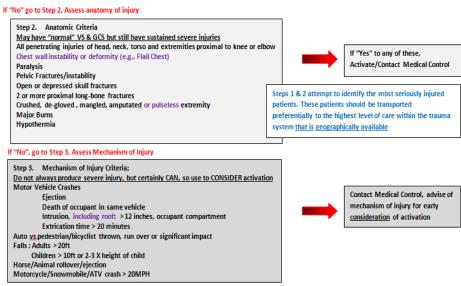
EMS & Facilities should utilize these criteria to identify patients needing trauma team activation

Goals for all phases of care include early identification, communications with EMS/medical control/facilities and notification to enhance effectiveness
While these criteria are presented in sequential fashion, using all applicable criteria to identify significantly injured patients is advised

Trauma Patients with severe injuries should be transported preferentially to the highest level of care within the trauma system geographically available

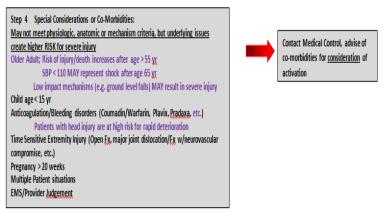


If "No" go to Step 2, Assess anatomy of injury



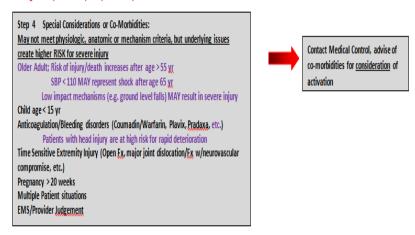
If "No", go to Step 4, Assess special patient or system considerations

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When in doubt, Activate/Contact Medical Control!

If "No", go to Step 4, Assess special patient or system considerations



When in doubt, Activate/Contact Medical Control!

STCC members discussed and resolved to support the recommended revisions to the MT Criteria from the multidisciplinary work group (purple font). The revised MT Criteria will be posted on the EMSTS website and distributed statewide and in the RTACS.

MT Third Preventable Mortality Study;

- Traumatic deaths for 2008
- 1008 initial cases
- Excluding for Non-mechanical trauma,
- Non-trauma, late effects; To-date cases = 446 with 420 cases in-put into study Collector PM Study Panel;

Tom Esposito, MD, FACS, MPH, IL Stu Reynolds, MD, FACS, Havre Chad Engan, MD, FACS, Great Falls,

Andy Michel, MD, Helena

Freddy Bartoletti, MD, Anaconda

Sally Hageman, RN, Billings

Sam Miller, RN, Bozeman

Chris Benton, RN, Red Lodge

Megan Hamilton, RN, EMT-P, Missoula

Francine Giono, EMT-B, Whitehall

Lauri Jackson, APRN, Great Falls

Initial PM Study panel orientation meeting,

January 5 & 6, 2012, in Helena @ Cogswell Building RM 209

Panel members will be assigned as Primary/Secondary reviewers for cases; present cases to group for evaluation and determination

Looking for opportunities for improvement in phases of care, types of care, identification of system priorities.

VII. EMS Update; Jim DeTienne

The Legislative Audit identified the need for a broad advisory committee to advise the department on EMS system development & implementation. The Emergency Care Committee has been developed to meet that identified need and is a multidisciplinary group working on EMS & Emergency care system issues. Current activities are around developing the strategic plan to identify and prioritize the committee's activities. Utilizing those processes, some initial sub-groups have been established,

including those for; Emergency Medical Dispatch, Air medical Workgroup and a group interested in data systems.

The Board of Medical Examiners is developing legislation for appointment of a BOME representative to STCC.

VIII. Subcommittee Reports

Education Subcommittee;

The group discussed issues related to TEAM courses, ATLS, TNCC & PEPP. S. Graham is working on a strategy to make PHTLS classes more accessible with more availability of Instructor updates as well. Spring Fever is scheduled for 5/14/12 in Missoula. There are still ATT books available at a discount for state-wide course use.

PI/EP Subcommittee:

PI Subcommittee needs additional STCC membership to function more effectively. The PI Subcommittee meetings may only be attended by PI Subcommittee members to provide confidentiality in the designation process. Freddy Bartoletti, Brad Vonbergen and Sam Miller are willing to serve on PI Subcommittee.

Designation activities were covered in the state report

IX. New Business: Missoula Area Bus Crash; John Bleicher, Don Whalen & Traci Jasnicki

Bus crash events were reviewed and discussed. An initial panel will present bus crash events at Spring fever 5/14. There will also be an in-depth panel presentation of "lessons learned" during the Rocky Mountain Rural Trauma Symposium in September.

Issues identified;

Scene access was problematic due to road conditions, creating 5 additional crashes and response hazards

Field triage tags were useless in the dark and extensive use of colored triage tape and flags were more effectively utilized.

Cell phone service was coincidentally down during the situation, further complicating communications

Both scene & facility responses and mobilizations were excellent

Facility plans for prioritization of XRAY/CT studies needs further development

"Inside out" plans for mobilization/transfer of patients OUT of facilities would be necessary in a larger event and should receive planning efforts

Public Comment

None received

Adjournment

Brad Pickhardt adjourned the meeting.

The next State Trauma Care Committee meeting will be held in Helena, WEDNESDAY, May 9, 2012 in Helena.

Regional System Performance Improvement;

WRTAC: MVC down embankment rural location, 2 patients. Issues discussed included? time issues related to? recognition of significant injuries, medical interventions for injury-based symptoms and a discussion of triggers for utilization of FFP in blood product administrations with & without need for Massive Transfusion implementation.

Further discussion of whether facilities are beginning to evaluate use of Tranexamic acid (TXA) in their MTP procedures and whether could be utilized in the field under specific circumstances (within 3 hours of initial injury) based on CRASH 2 studies.

CRTAC: "Stable" VS with significant injuries and significant MOI transported by ground transport with RN intercepted by CCP ALS service. Issued discussed included appropriateness of types/methods/staffing of interfacility transfers given patient circumstances and continued efforts to address interfacility transfer issues in a rural state.

Minutes respectfully submitted by Jennie Nemec, RN, Trauma System Manager